

Summary Report:  
High Rate Underage Users Workgroup  
Findings and Recommendations

Prepared for:

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## High Rate Underage Users Workgroup Summary Report

This brief report highlights the work of the High Rate Underage Users Workgroup for full GPAC membership. The report documents the research activities, deliberations and products the workgroup has developed over the past nine months. It also summarizes major findings that document the extent of high rate underage substance use in California, identifies the need for service, and makes recommendations concerning ways to meet these needs. Overall, this report confirms the seriousness of high rate underage drinking as a problem for California youth, and affirms the need for targeted services to ameliorate this important health, safety and youth development issue.

### **What We Did**

The workgroup began its work in the spring of 2004. At the first meeting (April 1, 2004) the workgroup identified the following objectives for addressing the needs of the population of high rate underage substance users:

- To summarize trends in different levels of substance use in California, and implications for meeting the prevention/intervention needs of students;
- To identify the characteristics of high rate alcohol users and high rate drug users, and to assess the overlap of these groups;
- To estimate the percentage of students who are in need of focused indicated prevention interventions in California schools (primarily secondary schools);
- To explicate Student Assistance Programs (SAPs) as an effective school-based intervention for high risk youth;
- To present new information concerning the current use of SAPs in California; and,
- To identify important issues which require consideration in supporting the effective future development or implementation of SAPs in California.

To accomplish these objectives the workgroup and CPI staff undertook the following major tasks:

- *Secondary Analysis of 2003 California Student Survey Data.* CARS and WestEd developed secondary analyses of California Student Survey trend data and current (2003) data on substance use by 7<sup>th</sup>, 9<sup>th</sup> and 11<sup>th</sup> grade students to document high rate substance use by California students. The results of this analysis were

presented in Background Briefing Report #1: 'High Rate Underage Users: Need and Promise of a School-Based Solution.'

- *Internet Survey.* CARS developed an internet survey targeting representatives of SAP-type programs in California schools. A total of 102 responses were received. Most respondents represented high schools (36), while a large proportion also came from elementary (23) and middle schools (17). Respondents also represented district offices (10) and alternative schools (3). The results of this survey were presented in Background Briefing Report #1: 'High Rate Underage Users: Need and Promise of a School-Based Solution' and Briefing Report #2: 'California High School SAPs'.
- *Site Visits.* Site visits were conducted of the Oakland High School SAP, several East Union High School District school-site SAPs in San Jose, and the district-wide Desert Sands Unified School District SAP in Riverside County. CARS staff spent one to two days at each site collecting program records, interviewing directors and school personnel, conducting focus groups with participating students, and observing program activities. The results of this work were presented in the Background Briefing Report #2.
- *Review of Intervention Services.* A review of the literature on potential intervention services for high rate adolescent AOD users was conducted. The results of this review were presented in Background Briefing #3: 'Intervention Services for High School High Rate Users'.
- *Review of SAP Evaluations.* The Workgroup implemented a search for existing evaluations of SAP initiatives, and reviewed published and unpublished reports. Existing evaluation findings were summarized and synthesized in Background Briefing #4: 'SAP Evaluation Results'.
- *Interviews and Literature Review.* CARS staff conducted an Internet search for SAP materials, called SAP program developers and administrators around the country and reviewed literature on SAPs. Documentation of current practice was presented in Background Briefing Report #5: 'The SAP Model'.

### **What We Found**

The results of the comprehensive review and assessment of the workgroup were documented in a series of five Background Briefing reports (outlined above) produced by CARS staff. The following presents the selected highlights from the work done by the workgroup.

#### ***Summary of Alcohol and Drug Use Levels and Trends for California's Students***

Despite many years of emphasis on AOD prevention, the percentage of students who report high rate use has been relatively constant over the past decade. According to the

2003 California Student Survey (CSS), a substantial percentage of California's secondary school students report they are high rate users:

- 30% for Excessive Alcohol Users<sup>1</sup> (EAU)
- 20% for High Rate Users<sup>2</sup> (HRU)

Binge drinking<sup>3</sup>, an indicator of serious alcohol use for youth, is also a problem for California's high school students. By 11<sup>th</sup> grade, approximately one-fourth of the CSS student sample reported binge drinking at least once in the past 30 days. For 9<sup>th</sup> graders, 11.5% binge once per month, and 7.2% binge three or more times per month.

### ***Implications for Meeting the Prevention/Intervention Needs of Students***

The CSS data clearly documents that a substantial number of California's students are binge drinkers, EAUs or HRUs. It is thus especially important to identify and implement effective school-based interventions that will reach these youth because they are the students who are most likely to put themselves and others in harm's way as a result of their substance use. In addition, research has shown that young substance abusers put their futures at risk. A recent RAND study that followed youth from grade 7 to age 23 found that "by young adulthood, early alcohol use was associated with employment problems, other substance abuse, and criminal and violent behavior" (Ellickson, Tucker and Klein, 2003:949).

### ***Characteristics of High Rate Alcohol Users, High Rate Drug Users, and the Overlap of these Two Groups***

In past analyses of CSS data, WestEd has defined a portion of the HRU youth who are particularly in need of intervention because they report problems and/or dependency use patterns. HRU youth who report two or more consequences and/or dependency patterns are categorized as **HRU Plus**. *Four and one-half percent of 9<sup>th</sup> graders and 8.6 percent of 11<sup>th</sup> graders were in particular need of intervention for drug use in 2003 by the HRU Plus criteria.*

For this workgroup's analysis, the proportion of binge drinkers who reported two or more dependency patterns or problems caused by alcohol or substance abuse was categorized as **Binge Drinker Plus**. *Calculations showed just under five percent (4.4 %) of 9<sup>th</sup> graders and 10.7 percent of 11<sup>th</sup> graders were in this Binge Drinker Plus group. The majority of these (2.3 % in 9<sup>th</sup> and 6.4 % in 11<sup>th</sup>) binged 3 + times in the past 30 days. These problem-experiencing binge drinkers constitute 43 percent of those who binge drink at all in the 9<sup>th</sup> grade, and 39 percent of those who binge drink in the 11<sup>th</sup> grade.*

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<sup>1</sup> EAUs are defined as youth who report a) drinking 5 drinks in a row three days in the past 30 days, b) were very drunk or sick three or more times in a lifetime, or c) like to drink to get drunk or feel the effects a lot.

<sup>2</sup> HRUs are defined as youth who report a) weekly or more frequent marijuana use, b) any use of cocaine in the last 6 months, c) three or more occasions of the use of two or more different drugs (including alcohol) at the same time in the last 6 months (polydrug use), or d) a pattern of multiple or high frequency of any illicit drug(s) other than marijuana or cocaine.

<sup>3</sup> Binge drinking is defined as five or more drinks at a single setting (within a few hours) for boys and four or more drinks for girls.

There is a large overlap between **HRU Plus** youth and **Binge Drinker Plus** youth. *Three fourths of 9<sup>th</sup> graders categorized as Binge Drinkers in particular need of intervention were also categorized as HRU Plus. For 11<sup>th</sup> graders, 60 percent of those categorized as Binge Drinkers in particular need of intervention were also categorized as HRU Plus.* Students with problems related to binge drinking are also likely to have problems related to the use of other drugs.

***Estimation of Percentage of Students Who Are In Need of Focused Secondary Prevention Interventions in California's Schools***

When **HRU Plus** youth and **Binge Drinker Plus** youth are combined, we find that an estimated 6.1 percent of California's 9<sup>th</sup> graders and 13.0 percent of 11<sup>th</sup> graders were in particular need of intervention because they were experiencing life problems due to their alcohol use, drug use, or most often both.

The Workgroup's analysis of the CSS data and projections using California student population data produced the following estimates of the numbers of California's adolescents in need of intervention services.

- **High school Binge Drinkers:** **356,000**
- **High school Problematic Use:**
  - **2 or more problems/issues:** **114,700**  
(CARS projections using California Student Survey data)
- **Serious Alcohol Use (DSM-IV Alcohol Dependency and Substance Use)**
  - **16-17 years** **83,750**  
(George Washington University Medical Center for Ensuring Solutions to Alcohol Problems)
- **Dependency/Abuse**
  - **Alcohol Dependency 12-17 years** **50,000**
  - **Alcohol Dependency/Abuse 12-17 years** **138,000**
  - **Alcohol or Illicit Dependency/Abuse 12-17 years** **221,000**  
(National Household Survey on Drug Use and Health)

***Student Assistance Programs as an Effective School-Based Intervention for High Risk Youth***

The workgroup conducted a thorough examination of SAPs. This involved a comprehensive review of the literature, visiting SAPs, and conducting interviews with a number of states who currently fund and support SAPs. The following summarizes what

the workgroup found (see Briefing Report #5 for a comprehensive report on the results of the workgroup's examination of SAPs).

*What is a SAP?*

SAPs are a school-based approach to providing focused services to students needing interventions for substance abuse or other problems. SAPs identify and link students to behavioral health education, programs and services in the school and community to address students' barriers to learning due to a social, emotional, or mental health issue. SAPs are a process, not a curriculum or treatment center, that connects education, programs, and services within and across systems to aid students and their families.

*What do SAPs do?*

As a process, SAPs:

- Identify troubled students
- Assess students' needs
- Provide support and referral to school, family, and community resources to address these needs

The overarching goal of SAPs is to remove barriers to education so that a student may achieve academically.

*What is the SAP service process?*

- **Referral of students** comes from classroom teachers, school counselors, through school disciplinary processes, by parents, and occasionally by students themselves.
- **Services are delivered** by a core group of individuals, typically a combination of school personnel (e.g. administrators, nurses, counselors, and teachers) and external service providers (e.g. community-based organizations or community health providers).
- **Services provided** include educational support groups, referral to outside agencies, tutoring, after-school activities, peer mediation and conflict resolution, and career services.
- **Issues addressed** by many SAPs are:
  - **Prevention** (AOD, tobacco, drop-out, pregnancy & STDs)
  - **Violence/Bullying**
  - **Academics/Attendance**, or
  - **Behavior and Mental Health** (grief, anger management, relationships, self-harm).

*New Information Concerning the Current Use of SAPs in California*

The number of SAPs that currently exist in California is unclear. CARS's Internet survey garnered responses from 101 programs across the state. According to the California Department of Education's Local Educational Agency (LEA) Plan database for 2003-04, 353 of 1298 LEA's reported having a SAP. These programs are identified by various titles, however, not necessarily "Student Assistance Program." Examples include "Care Team," "Student Services," or "Staff Offering Support."

Issues most often addressed by California SAPs, according to survey results, include AOD, mental health, and academic concerns. SAPs address many other issues, as well, but at lower frequencies. Most of respondents' SAPs serve students' needs through, among other methods, support /peer groups (80%), counseling (76%), and prevention education classroom presentations (67%). Most SAPs (80% of high school SAPs) collaborate with outside service providers and community agencies.

When asked to report significant obstacles to successful operation, SAP personnel most often cited problems with funding (that it is low, piecemeal), staffing (burdened teacher population), program awareness and buy-in within the school climate, and limited evaluations (most are process-oriented).

### **What We Recommend**

On February 15, 2005 the High Rate Underage Users Workgroup convened for the final time to consider potential recommendations. Suggestions clustered into three broad areas:

- Activities to pursue now
- Areas requiring additional information
- Roles for GPAC membership

Nearly all of the recommendations focused on the use of Student Assistance Programs (SAPs) to meet the needs of the high rate underage user.

### **What Can be Done Now?**

1. Develop a statewide awareness campaign targeting school systems and students' parents.

The workgroup believes information developed for the members merits wide public dissemination and attention. Specifically, results from the July 29th briefing report clearly document (1) a persistent level of high rate alcohol and drug use in California high schools and (2) disproportionate involvement in negative school outcomes and problematic social behaviors by high rate users.

Presentations of the findings to California School Drug Educators have been well received, with a number of schools requesting on-site presentations to school administrators, counselors and youth program leaders. The workgroup encourages continued presentations through the Department of Alcohol and Drug Programs (ADP) Community Prevention Institutes TA and Training contractors. Copies of the presentation with talking points should be made available to schools, parent groups and community organizations interested in the topic.

In addition to presentations, a "tool kit" for schools concerning the high rate users needs to be developed. This tool kit could contain fact sheets and guidance on steps to take locally. Information needs to be disseminated through other means,

including websites, conferences, journals or publications targeting teachers and school administrators.

2. Compile effective resources at the California Healthy Kids Resource Center.

Pertinent information about adolescent high rate users and their relationships to poor school and social outcomes needs to be forwarded to the CHK Resource Center. A number of useful tools could be developed and made available at the Center (i.e. calculator templates to determine percent of students falling into these categories; lost days of school and other school based and social issues can be calculated as well). The model for this is George Washington University Medical School Center's statewide calculators for determining students at risk for serious alcohol problems.

The tool kit and other potentially useful resources, curriculums or strategies for reducing high rate underage alcohol use could be maintained at the Resource Center as well.

Additional and ongoing research on effective interventions needs to be undertaken in a systematic fashion. New information should be collated, organized and made available through the Resource Center.

3. Create a Formal State SAP Movement

There are potentially up to 360 SAPs operating in California. The majority are funded by the California Department of Education (some are funded with federal funds). While some of the school SAPs have assumed a leadership role in the state (e.g. Riverside) and have sponsored statewide conferences, there remains a need to formally invite all schools through conferences, or web assisted mediums (list services, etc.) so that SAPs can more effectively communicate and share information with each other. A dedicated web-based learning community should be developed to support this consortium of programs.

4. Develop California State Board Association (CSBA) Policy/Regulations to include HRU and Binge Drinking Component.

Currently, a SAP provider has worked with the California State Board Association to formulate language concerning the implementation of Student Assistance Programs in school systems. Special emphasis on issues associated with the persistent High Rate Users should be considered. This may involve school level screening or assessment procedures as well as the use of sanctions appropriate to the needs of this population.



5. Expand Network of SAP Trainers

The Masonic SAP Model is extremely popular with California School administrators and staff. Unfortunately it is in limited availability. Ways to expand the training, perhaps using Safe School trainers, and California's Regional Structure (11 regions) to promote SAP awareness needs to be considered.

6. Legislative Support

Efforts to garner legislative support needs to occur. It may possible to augment current pending legislation (i.e. L. Yee's AB171) or solicit another sponsor to promote SAPs as an intervention for California Students in need of this level of service.

7. Brief Interventions as an approach to meet the needs of the High Rate Underage User

The workgroup identified two brief interventions of potential benefit for high rate underage users. One is used by physicians and the other can be conducted by trained but non counseling credentialed, adults. Both have preliminary results demonstrating their effectiveness. Neither has however, model program status. Efforts should be made to make training opportunities on the models available to adults involved with youth. In addition, it would be useful to implement a pilot project employing a rigorous research design to test the effectiveness of the program.

**What Do We Still Need To Know?**

8. Program Budgeting

The workgroup was successful in identifying a number of cost considerations and budgets to manage and operate an SAP program. This information is at the state, district and individual level. However, more work is required to apply this information to California's situation. Specifically, what are the costs to implement a statewide SAP service system covering varying percents of the student population. Other budgetary exercises could examine details for implementing SAPs in California's rural communities. Further work on examining low cost options for delivery of SAP service needs to be considered.

9. Funding Options

Additional work to identify the full range of potential funding services to support SAPs needs to be undertaken. Options discussed by the workgroup include SDFSC funding (however this funding base is in jeopardy based on proposed

changes in the National Budget). Potential to tap into Medical or EPSDT were discussed by the workgroup.

10. Monitor SAP Evaluations

The SAP evaluation record, while presenting positive findings have, generally made use of weak designs. Currently more rigorous studies are being conducted (i.e. Washington State). Efforts to monitor these more robust SAP evaluations need to be undertaken.

***What Role(s) for GPAC Members?***

11. Maintaining the Focus

The High Rate Underage Workgroup has completed the first phase of its work. The next phase involves implementation. While many of these recommendations can be achieved with minimal costs, others such as the implementation of a SAP structure throughout the state would require substantial resources. A discussion on how best to manage this process should be undertaken with other GPAC members.

12. Diversify Workgroups

The workgroup for Phase II is desirous of expanding its membership to include more GPAC representation. Alternatively a separate structure for implementing the recommendations could be created (e.g. a separate workgroup could work on building a statewide SAP organizational structure). This workgroup could involve experienced school administrators.

13. Funding Services

As mentioned earlier, the need for identifying potential new sources to fund SAPs should be of the highest priority. Conventional prevention programs have been ineffective in impacting the problem of high rate consumption.

The project started nine months ago and while much has been accomplished more needs to be done if we are to successfully impact the devastating problems associated with high rate use among a quarter of all high school student population.